Agency Report of: Public Official Appointments

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MATERIA .										
1.	Agency Name					California 806				
	City of Los Altos					TOILL CCC				
	Division, Department, or Re	gion (If Applicable)				For Official Use Only				
	Designated Agency Contact	(Name Title)								
		. (Name, nae)								
	Jon Maginot, City Clerk					Date Posted:				
		a Code/Phone Number E-mail				January 24, 2013				
_	650-947-2720	administration@losaltosca.gov		Page1_ of1		(Month, Day, Year)				
2.	Appointments									
	Agency Boards and Commissions	Name of Appointed Person		ot Date and gth of Term	Per Me	Per Meeting/Annual Salary/Stipend				
						▶ Per Meeting: \$				
		Name(Last, First)	- •	Appt Date	► Estimated Annual: \$0-\$1,000 \$2,001-\$3,000					
		Alternate, if any(Last, First)	-	in annual contraction						
		(2004, 7,704)		ength of Term	\$1,001-\$2,000					
		100				Other				
		1		, ,	▶ Per Meeting: \$					
		Name(Last, First)	· • — - ′	Appt Date						
			1			Estimated Annual:				
		Alternate, if any(Last, First)	. -	ength of Term	\$0-\$1	,000 \$2,001-\$3,000				
				angur or renn	\$1,00	1-\$2,000				
						Other				
				, ,	Per Me	eting: \$				
		Name (Last, First)	· ' — '	Appt Date	1 7 67 107	curig. V				
					▶ Estimat	ted Annual:				
		Alternate, if any(Last, First)	. - Le	ength of Term	\$0-\$1	,000 \$2,001-\$3,000				
					\$1,00	1-\$2,000				
			-			Other				
		hlome		, ,	▶ Per Me	eting: \$				
		Name(Last, First)	' — '	Appt Date						
					_	ed Annual:				
		Alternate, if any(Last, First)		ngth of Term	\$0-\$1	,000 \$2,001-\$3,000				
					\$1,00	1-\$2,000 Other				
						Other				
	Verification				-					
	I have read and understand FPPC Regulation 18705.5. I have verified that the appointment and information identified above is true to the best of my information and belief.									
Marcia Somers CITY MANAGER 1/24/1										
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)										
	There are no positions for which Council members receive compensation									